## Exhibit F

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05133410048 0002

a. T Code = 13196

This report MUST be filed to satisfy franchise tax requirements Do not write in the space above

c. Taxpayer identification number d. Report year 3-01172-9965-8 2005

## TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT Corporation name and address

PARKADE CENTER INC

29 BROADWAY KNATHAN BERKMAN & CO

NEW YORK NY 10006-3201

e. PIR / IND

Secretary of State file number or, if none, Comptroller unchartered number g. 🗰

Tax Report, Form 05-142

0131807300

If the preprinted information is not correct, please type or print the correct information.

The following information MUST be provided for the Secretary of State (SOS) by each corporation or limited liability company that files a Texas Corporation Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

Blacken this circle completely if there are currently no changes to the information preprinted in Section A of this report. Then, complete Sections B and C.

Corporation's principal office

149 COLONIAL ROAD, MANCHESTER, 06045

Principal place of business

lease sign below! Officer and director information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the

information as officers and directors change SECTION A. Name, title, and mailing address of each officer and director. throughout the year. NAME DIRECTOR TITLE Term expiration (mm-dd-yyyy) NELL ELLIS PRESIDENT YES MAILING ADDRESS 149 COLONIAL ROAD MANCHESTER, CT 06045 TITLE DIRECTOR Term expiration (mm-dd-yyyy) STUART GREENWALD SECRETARY YES MAILING ADDRESS 149 COLONIAL ROAD MANCHESTER, CT 06045 NAME TITLE DIRECTOR Term expiration (mm-dd-yyyy) STUART GREENWALD TREASURER YES MAILING ADDRESS 149 COLONIAL ROAD MANCHESTER, CT 06045 NAME DIRECTOR: Term expiration (mm-dd-yyyy) TITLE NELL ELLIS DIRECTOR YES MAILING ADDRESS 149 COLONIAL ROAD MANCHESTER, CT 06045 NAME THE DIRECTOR Term expiration (mm-dd-yyyy) STUART GREENWALD DIRECTOR YES MAILING ADDRESS 149 COLONIAL ROAD MANCHESTER, CT 06045

List each corporation or limited liability company, if any, in which this reporting corporation or limited liability company owns an interest of ten percent (10%) or more. Enter the information requested for each corporation or limited liability company. SECTION B.

Name of owned (subsidiary) corporation	State of incorporation	Texas SOS file number	Percentage Interest
		, i	
Name of owned (subsidiary) corporation	State of incorporation	Texas SOS file number	Percentage Interest

List each corporation or limited liability company, if any, that owns an interest of ten percent (10%) or more in this reporting corporation or limited SECTION C. liability company. Enter the information requested for each corporation or limited liability company.

Name of owning (parent) corporation	State of incorporation	Texas SOS file number	Percentage Interest
FIRST HARTFORD CORPORATION	ME	,	100
Registered agent and registered office currently on file. (See instructions if you need to make changes.)			

Agent DULAN D ELDER

Office: 1722 BROADWAY MCWHORTER COBB AND JOHNSON

LUBBOCK, TX 79401

Blacken this circle if you need forms to change this information. Changes can also be made on-line at http://www.sos.state.tx.us/corp/sosda/index.shtml

declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who

			The state of the s	and company at a control and portuness;
sign k	Officer, director, or other authorized person	Titte	Date	Daytime phone (Area code and number)
here /	Aletan Hilles	ele /le	,	

of this report. Then, complete Sections B and C.		Please sign below! Officer and directo
Corporation's principal office  149 COLONIAL ROAD, MANCHESTER, CT 0	6045	as of the date a Public Information Report in completed. The information is updated annually
Principal place of business		as part of the franchise tay report. There is needline to procedure for supplementing the information as officers and directors change
SECTION A. Name, title, and mailing address of each officer and director.		throughout the year.
NAME,	TITLE	DIRECTOR Term expiration (mm-ad-yvyy)
NELL ELLIS	, PRESIDEN	TYES
MAILING ADDRESS :		
149 COLONIAL ROAD MANCHESTER, CT 060	145	
NAME	TITLE;	DIRECTOR/ Term expiration (min-ad-yyyy)
STUART GREENWALD	SECRETAR	Y YES
MAILING ADDRESS.		
149 COLONIAL ROAD MANCHESTER, CT 060	145	
NAME:	TITLE	:DIRECTOR Term expiration (mm-ad-yyyy)
STUART GREENWALD	TREASURE	R YES
MAILING ADDRESS:		
149 COLONIAL ROAD MANCHESTER, CT 060	145	
NAME	TITLE	DIRECTOR Term expiration (mm-dd-yyyy)
NELL ELLIS	DIRECTOR	X YES .
MAILING ADDRESS:		
149 COLONIAL ROAD MANCHESTER, CT 060	)45	
NAME	[:TITLE:]	DIRECTOR Term expiration (mm-dd-yyyy)
STUART GREENWALD	DIRECTOR	i X YES
MAILING ADDRESS:		
149 COLONIAL ROAD MANCHESTER, CT 060	)45	
SECTION B. List each corporation of limited liability company, if any, in which to percent (10%) or more. Enter the information requested for each	this reporting corporation corporation is corporation or limited liab	or limited liability company owns an interest of ten pility company.
Name of owned (subsidiary) corporation	State of incorporation	Texas SOS file number Percentage Interest
Name of owned (subsidiary) corporation	State of incorporation	Texas SOS file number Percentage Interest

List each corporation or limited liability company, if any, that owns an interest of ten percent (10%) or more in this reporting corporation or limited liability company. Enter the information requested for each corporation or limited liability company. Texas SOS file number Percentage Interest Name of owning (parent) corporation State of incorporation 100 FIRST HARTFORD CORPORATION Registered agent and registered office currently on file. (See instructions if you need to make changes.) Agent: DULAN D ELDER Office: 1722 BROADWAY MCWHORTER COBB AND JOHNSON Blacken this circle if you need forms to change this information. Changes can also be made on-line at LUBBOCK, TX 79401 http://www.sos.state.tx.us.corp/sosda/index.shtml I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer or director and who is not currently employed by this corporation or limited liability company or a related corporation. Daytime phone (Area code and number)

Officer Title

here!

Reports Unit P.O. Box 12028 Austin, Texas 78711-2028

Phone: 512-475-2705



Roger Williams Secretary of State

## Office of the Secretary of State PERIODIC REPORT - LIMITED PARTNERSHIP

PERIODIC REPORT - LIMITED PARTNERSHIP			
Fili	ng Number: 11557610		Page 1 of 1
Fili	ng Fee: <b>\$50.00</b>		FILED
1. The limited partnership i			In the Office of the Secretary of State of Texas
		CK LIMITED PARTNERSHIP II	JUL 1 1 2005
2.	It is organized under the Texas	laws of: (set forth state or foreign country)	Corporations Section
3.	The name of the registere Mark E Golman	ed agent is:	
	(Make changes here):		
4.	The business address of t 901 MAIN ST., STE 430 Dallas, TX 75202	he registered agent and the registered off 00,	ice address is:
	(Make changes here-use stree	t or building address; see Instructions):	
5.		pal office in the United States where the nicle 6132a, Section 1.07 of the Texas Re	
6.		of all general partners of the limited partners, include the information as an attachment to the	
	<u>Name</u>	Address	City/ State/Zip
	PARKADE CENTER, INC.	149 COLONIAL RD.	Manchester, CT 06040
The	materially false or fraudle	ent instrument.    Arkada Carra   Arkada Carra   Signed on behalf of the limited pa	by law for the submission  - / A C . G / Llaw  - rtnership
		By (general partner)	

Come visit us on the Internet @ http://www.sos.state.tx.us/ Fax: 512-463-1425

Dial: 7-1-1 for Relay Services